

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/665,984
		Filing Date	September 19, 2003
		First Named Inventor	McGee, Christopher
		Art Unit	2876
		Examiner Name	Unassigned
Total Number of Pages in This Submission	4	Attorney Docket Number	020375-042800US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard 15 Cited References
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	Townsend and Townsend and Crew LLP Nena Bains Reg. No. 47,400
Signature	
Date	January 22, 2004

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Michael Nowak		
Signature		Date	January 22, 2004

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

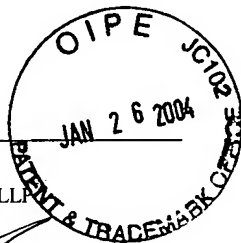
PATENT
Attorney Docket No.: 020375-042800US

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

On 1/22/04

TOWNSEND and TOWNSEND and CREW LLP

By: 



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

McGee, Christopher, et al.

Application No.: 10/665,984

Filed: September 19, 2003

For: FINANCIAL PRESENTATION
INSTRUMENTS WITH INTEGRATED
HOLDER AND METHODS FOR USE

Examiner: Unassigned

Art Unit: 2876

INFORMATION DISCLOSURE
STATEMENT UNDER 37 CFR §1.97 and
§1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A are being called to the attention of the Examiner. Copies of the references are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no

representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement.

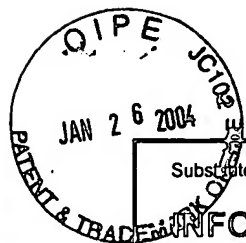
However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Nena Bains
Reg. No. 47,400

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, California 94111-3834
Tel: 415-576-0200
Fax: 415-576-0300
NB:mbn
60123459 v1



INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)		Complete if Known			
		Application Number	10/665,984		
		Filing Date	September 19, 2003		
		First Named Inventor	McGee, Christopher		
		Art Unit	2876		
		Examiner Name	Unassigned		
Sheet	1	of	1	Attorney Docket Number	020375-042800US

U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)			
	0001	US-4,829,168	05-09-1989	Nakahara	
	0002	US-5,720,158	02-24-1998	Goade, Sr.	
	0003	US-5,918,909	07-06-1999	Fiala et al.	
	0004	US-5,921,584	07-13-1999	Goade, Sr.	
	0005	US-6,471,127 B2	10-29-2002	Pentz et al.	
	0006	US-6,543,809	04-08-2003	Kistner et al.	
	0007	US-6,588,658 B1	07-08-2003	Blank	
	0008	US-Des. 396,882	08-11-1998	Neal, Jr.	
	0009	US-Des. 429,733	08-22-2000	Jones et al.	
	0010	US-D436,991 S	01-30-2001	Morgante	
	0011	US-D457,556 S	05-21-2002	Hochschild	
	0012	US-2002/0027837 A1	03-07-2002	Weber	
	0013	US-2002/0185543 A1	12-12-2002	Pentz et al.	
	0014	US-2003/0010829 A1	01-16-2003	Krygier	

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ^o
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
	00015	CA	2,300,241		03-08-2000	Weatherford		<input type="checkbox"/>

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.